BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

DE 010032

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												THAN						
_			(Column 1)		(Column 2)		TY	TYPE		OR	SMALL	ENTITY						
TOTAL CLAIMS			15					RATE	FEE		RATE	FEE						
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	370.00	OR	BASIC FEE	740.00						
TOTAL CHARGEABLE CLAIMS			/ S minus 20=		· 0		>	· (\$ 9=		OR	X\$18=							
INDEPENDENT CLAIMS			/ minus 3 =		* 2		>	< 42=		OR	X84=							
MULTIPLE DEPENDENT CLAIM PRESENT /							+	140=		OR	+280=							
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	T	OTAL		OR	TOTAL	740						
CLAIMS AS AMENDED - PART II								•			OTHER	THAN						
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							S	MALL E	ENTITY	OR	SMALL	ENTITY						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=							
	Independent	*	Minus	***	T CL AIM	=	>	(42=		OR	X84=							
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=.	:	OR	+280=							
								TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE							
		(Column 1)		(Colu	mn 2)	(Column 3)	٨٥٤	// /			ADDII. I CE							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	77 7 ₂ 1. 20 77.	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=							
	Independent	*	Minus	***		=		(42=		OR	X84=							
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										000							
•	+140= TOTAL									OR	+280=							
										OR	TOTAL ADDIT. FEE							
(Column 1) (Column 2) (Column 3)																		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=							
	Independent	*	Minus	***	T CL AINA	=	×	(42=		OR	X84=							
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140=		OR	+280=							
		mn 1 is less than the					. L	TOTAL		ΛP	TOTAL							
***	If the "Highest Nu	ımber Previously P	aid For" IN THI	S SPACE	is less tha	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												